

1. Name of Applicant _____
2. Name of Business _____
3. Permanent Street Address _____
4. City, State, Zip Code _____
5. Telephone Number _____
6. Fax Number _____
7. Email Address _____
8. Local Street Address _____
9. City, State, Zip Code _____
10. Local Phone Number _____
11. Dates Sales to be Conducted _____
12. Name, title, address, telephone number, fax number and email address, of the person having immediate supervisory or management responsibility over the applicant's business that is proposed to be carried on in the City

13. Name, email and street address of persons having custody of applicant's financial records

14. Names of municipalities or governmental units to which the applicant has applied for a transient merchant's license or license of similar character within the twelve (12) months prior to the date of application _____

15. List all other State or City permits already applied for or issued _____

16. Applicant's employer number for reporting to the Internal Revenue service _____

Itinerant Merchants complete this section.

1. Name of the applicant, if the applicant is a corporation, the name of the officers of the corporation; if the applicant is a partnership, the names of all partners _____

2. Please list the name and ages of all persons who will be selling goods under the license _____

3. Please list location(s) where sale will be conducted _____

4. Have you previously held a license as an Itinerant Merchant in the City of Campaign? _____

If yes when? _____

5. Please list type of goods, wares, merchandise, services, etc. that the applicant intends to sell or offer for sale at the above location _____

6. Please attach written evidence of the right to occupy a specific location at which the sales activity is proposed, and a site plan if the sale is conducted outside an existing structure showing the sales area and parking areas. If the sale is inside a structure, a parking plan to show compliance with zoning requirements.

7. Please attach a bond with guarantees running to the City in the sum of One Thousand Dollars (\$1000.00) executed by the applicant, as principal, with good and sufficient sureties upon which service of process may be made in the State. The bond shall be in force and effect for a one (1) year period after application. Such bond may alternatively be secured by cash deposit. (No bond shall be required of a transient merchant who has held a license for three (3) or more years and has not had, during such period, a transient merchant license suspended or revoked in the City or in any other jurisdiction, or been convicted of an offense which would disqualify such person from receiving a license).

8. Please attach copy of the certificate of registration under the State of Illinois Retailers Occupation Tax Act or such information as the State requires to sell goods in the State.

(PLEASE GO TO THE LAST PAGE/SIGNATURE-DATE)

Peddlers & Mobile Food Trucks complete this section.

1. Boundaries of the area where peddling will be conducted _____
2. Nature of products or service or food type _____
3. Name of Manufacturer _____
4. Proposed Method of Operation _____
5. Have you previously held a license as a Peddler in the City of Champaign? _____
If yes, when? _____
6. If applying for a license in a congested area, please list area (high school or stadium) _____

7. If a motor vehicle is utilized for the sale of food, please list the following:

 Make of Vehicle _____ Year _____

 Body Style _____ Color _____

 License Plate Number _____

 Licensing State _____

 Driver's License Number _____
8. Please attach a picture of the vehicle, trailer (cart, etc.) you plan to use.
9. If vehicle is utilized for the sale of food, attach a copy of your Champaign-Urbana Public Health Permit.
10. Please attach a proof of vehicle insurance.
11. Please attach a copy of vehicle Registration.
12. (Food Peddlers only) - Please attach evidence of insurance that applicant is insured in an amount not less than One Hundred Thousand Dollars (\$100,000.00) for property damage and injuries, including injury resulting in death, caused by operation of the business.
13. Please attach a bond with guarantees running to the City in the sum of One Thousand Dollars (\$1000.00) executed by the applicant, as principal, with good and sufficient sureties upon which service of process may be made in the State. The bond shall be in force and effect for a one (1) year period after application. Such bond may alternatively be secured by cash deposit. (No bond shall be required of a transient merchant who has held a license for three (3) or more years and has not had, during such period, a transient merchant license suspended or revoked in the City or in any other jurisdiction, or been convicted of an offense which would disqualify such person from receiving a license).
14. Please attach copy of the certificate of registration under the State of Illinois Retailers Occupation Tax Act or such information as the State requires to sell goods in the State.

(PLEASE GO TO THE LAST PAGE/SIGNATURE-DATE)

Commercial Solicitors complete this section.

1. Have you previously held a license as a Solicitor in the City of Champaign? _____

If yes, when? _____

2. Please list boundaries of the area where soliciting will be conducted (residential areas, business areas)

3. Nature of products or service _____

4. Name of manufacturer _____

5. If employed by someone other than yourself, please list employer's name, address, and phone number

6. Please attach a bond with guarantees running to the City in the sum of One Thousand Dollars (\$1000.00) executed by the applicant, as principal, with good and sufficient sureties upon which service of process may be made in the State. The bond shall be in force and effect for a one (1) year period after application. Such bond may alternatively be secured by cash deposit. (No bond shall be required of a transient merchant who has held a license for three (3) or more years and has not had, during such period, a transient merchant license suspended or revoked in the City or in any other jurisdiction, or been convicted of an offense which would disqualify such person from receiving a license).

7. Please attach copy of the certificate of registration under the State of Illinois Retailers Occupation Tax Act or such information as the State requires to sell goods in the State.

8. Please complete the next page "Authorization for Police Record Search".

(THEN GO TO THE LAST PAGE/SIGNATURE-DATE)

Group Sales Event complete this section.

1. Name of the applicant (sponsor), if the applicant is a corporation, the name of the officers of the corporation; if the applicant is a partnership, the names of all partners _____

2. Please list location where sale will be conducted _____

3. Please list names, addresses, telephone numbers, fax numbers, and State Tax Numbers of all transient merchant participants.

Name _____
Address _____
Telephone # _____
Fax # _____
State Tax # _____

Name _____
Address _____
Telephone # _____
Fax # _____
State Tax # _____

Name _____
Address _____
Telephone # _____
Fax # _____
State Tax # _____

Name _____
Address _____
Telephone # _____
Fax # _____
State Tax # _____

Name _____
Address _____
Telephone # _____
Fax # _____
State Tax # _____

Name _____
Address _____
Telephone # _____
Fax # _____
State Tax # _____

(Please attach information on additional vendors on a separate page)

4. Please attach written evidence of the right to occupy a specific location at which the sales activity is proposed, and a site plan if the sale is conducted outside an existing structure showing the sales area and parking areas. If the sale is inside a structure, a parking plan to show compliance with zoning requirements.

5. Please attach a bond with guarantees running to the City in the sum of One Thousand Dollars (\$1000.00) executed by the applicant, as principal, with good and sufficient sureties upon which service of process may be made in the State. The bond shall be in force and effect for a one (1) year period after application. Such bond may alternatively be secured by cash deposit. (No bond shall be required of a transient merchant who has held a license for three (3) or more years and has not had, during such period, a transient merchant license suspended or revoked in the City or in any other jurisdiction, or been convicted of an offense which would disqualify such person from receiving a license).

ALL COMPLETE THIS SECTION

I certify that the above information is correct to the best of my knowledge.

Name (please print) _____ Title _____

Signature _____ Date _____

_____ **DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY** _____

License No. _____ Date Approved: _____

License Fee: _____ Approved: _____

License Officer

Mobile Food Truck Generator Meter Reading _____

REVISED 2/18/15

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Finance Department • 102 N Neil St • Champaign IL 61820 • (217) 403-8940 • fax (217) 403-8995 • www.ci.champaign.il.us

AUTHORIZATION FOR POLICE RECORD SEARCH

I hereby authorize and empower the City of Champaign, Illinois and its agents to conduct a police record search;

SIGNED ON _____ AT _____

SIGNATURE: _____

NAME: _____

Please print (last) (first) (middle int.)

ALIAS NAMES USED (maiden, etc.) _____

ADDRESS: _____

PHONE NUMBER: _____

(area code)

DATE OF BIRTH: _____ HEIGHT _____ WEIGHT _____

SOCIAL SECURITY NUMBER: _____

DRIVER'S LICENSE NUMBER _____ / _____
(State)